STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

Attachment 1.1-B

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	State of Components	h of Pr	erto Ric	20					
	EVER(S) OF THE SINGLE STATE DER THE INTERGOVERNMENTAL O								
Wai	iver #1.1/	•	•			•			
a	Waiver was granted on								
	•		(date)						
b.	The organizational arrangement authorized, the nature and extent of responsibility for program administration delegated to, and								
	(name of agency)								
	the resources and/or servin administration of the					tilized			
•		, ,	• :	• .					
•	NOT APPLICABLE								

st. PR 6/20/74 10/15/14 4/1/74

^{1/ (}Information on any additional waivers which have been granted is contained in attached sheets.)

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State	Commonwealth of P	uerto Rico	· .	Attachment	1.1-B
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c. The methods for coordinating responsibilities among the several agencies involved in administration of the plan under the alternate organizational arrangement are as follows:

NOT APPLICABLE

PR 6/20/74 10/15/14 4/1/29